|                                        | · i                                 | ORDER FOR                        | SUPPLIE                                | SORS       | ERVIC                            | ES                      |                     |                                           | <u> </u>        | PAGE 1 OF 2 P.                                         | AGES                |                                         |
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| EE BILLING                             | e, NAME                             |                                  | 21. MAIL                               | INVOICE    | (O:                              |                         |                     | <del></del>                               |                 | -[                                                     | 1                   | /Co<br>page:                            |
| ISTRUCTION :<br>S                      | Environmenta                        |                                  | Agency                                 | <u></u>    | <u></u>                          |                         |                     |                                           |                 |                                                        |                     |                                         |
| ON<br>REVERSE                          | b. STREET ADDRE                     | SS (or F.O. Box)<br>angle Park F | inancial Ma                            | anagem     | ent Cer                          | nter (D                 | 143-                | 02)                                       |                 |                                                        |                     | . 47                                    |
|                                        | e. CITY                             |                                  | ······································ |            | d. STA                           |                         | e. ZIF              | CODE                                      | <del></del>     | ÷ \$85,465.                                            | 00                  | 17<br>Grai<br>Tot.                      |
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Contract: EP-W-07-071, Task Order: 0003

Lead PR Number: PR-HQ-08-10277

## Summary Information

Title:

Developing Tools to Improve Data Management for

Atmospheric Programs

Period of Performance:

From: 11/27/07

06/30/08 Tot

Award Date: Total Funding:

\$85,465.00

# Accounting/Appropriation Data

|      |          |      |        |               | Program | Site/    | Cost | 0þj  |             | <u>'</u> |
|------|----------|------|--------|---------------|---------|----------|------|------|-------------|----------|
| POP  | DCN      | BFYS | Appr.# | Org           | Element | Project  | Org  | Clss | Amount      | C        |
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| Base | FC7316   | 07   | ₿      | 58F7          | 105A46C | 00000000 |      | 2505 |             |          |
| Base | FC7318   | 07   | B      | 58 <b>F</b> 7 | 105A46C | 00000000 |      | 2505 | \$73,669.10 | ₽        |

## **Funding Breakout**

| Acct.Info       | Funding Category | Amount      |
|-----------------|------------------|-------------|
| FY2007 - FC7316 | Cost Ceiling     | \$11,795.90 |
|                 | Total:           | \$11,795.90 |
| FY2007 - FC7318 | Cost Ceiling     | \$73,669.10 |
| <u> </u>        | Total:           | \$73,669.10 |

#### **Procurement Management Roles**

TASK ORDER PROJECT OFFICER:

U.S. E.P.A. Attn: WILLIAM N. IRVING 1200 PENNSYLVANIA AVE, NW WASHINGTON, DC 20460

Mail Code: 6207J

Phone Number: 202-343-9065 Fax Number: 202-343-2359.

E-Mail Address: irving.bill@epa.gov

ALTERNATE TASK ORDER PROJECT OFFICER:

U.S. E.P.A. Attn: SUZANNE T. KOCCHI 1200 PENNSYLVANIA AVE, NW WASHINGTON, DC 20460

Mail Code: 6207J

Phone Number: 202-343-9386 Fax Number: 202-343-2359

E-Mail Address: kocchi.suzzane@epa.gov

#### Task Order Totals

| Category              | POP      | Amount      |
|-----------------------|----------|-------------|
| ~~ <del>~~~</del> === |          |             |
| Cost Ceiling          | Base Pd. | \$85,465.00 |

Page: 2

## TASK ORDER STATEMENT OF WORK

Title: Developing Tools to Improve Data Management for Atmospheric Programs

Contractor and Contract #:

TBD

Task Order #:

**TBD** 

**Estimated Level of Effort:** 

1090 hours

EPA Key Personnel:

Bill Irving, Suzie Kocchi

Task Order Project Officer (TOPO):

Bill Irving

US Environmental Protection Agency 1200 Pennsylvania Avenue, NW (6207J)

Washington DC 20460 Phone: (202) 343-9065 Fax: (202) 343-2359 irving.bill@epa.gov

Alternate TOPO:

Suzie Kocchi

Phone: (202) 343-9387 kocchi.suzanne@epa.gov

Subject Matter & Technical

Experts (SMTEs):

Renaldo Forte

Phone: (202) 343-9134 Forte.reynaldo@epa.gov

Janice Wagner

Phone: (202) 343-9118 Wagner.janice@epa.gov

Contracting Officer (CO):

Stacey Wolejko

1200 Pennsylvania Avenue, NW

Washington, DC 20460

Mail Code 3803R

Phone: 202-564-8902 Fax: 202-565-2554

E-mail: wolejko.stacey@epa.gov

#### I. INTRODUCTION

A key component of designing and managing a successful air quality and atmospheric program is a robust infrastructure to track, calculate and disseminate environmental data. There are a growing number of programs dedicated to registering and tracking greenhouse gas emissions data throughout the US and internationally. It is important to ensure these programs are designed effectively and operate credibly.

The Climate Change Division (CCD) in the U.S. Environmental Protection Agency's (EPA) Office of Air and Radiation works to assess and address global climate change and the associated risks to human health and the environment. CCD plays a key role in U.S. domestic and international efforts to address climate change by providing technical expertise and assistance to domestic and international greenhouse gas emission reporting and registries to ensure that the environmental data reported is credible.

#### II. BACKGROUND AND PURPOSE

U.S. EPA is providing technical assistance to a number of domestic and foreign governments on the assessment, design, and operation of effective air quality and climate programs. As part of EPA's efforts, it is essential that EPA promote environmental integrity and public credibility. A key element of effective, credible programs is the infrastructure to collect, manage, analyze, and disseminate environmental data. Due to growing interest in U.S. experiences with policies and tools such as sulfur dioxide and nitrogen oxides emissions trading, voluntary greenhouse gas emission reporting, and national emission inventories (greenhouse gases as well as conventional pollutants), EPA is in a position to advance the use of our programs as models around the U.S. and the globe.

The scope of this effort is to develop tools to enable the effective analysis, design, and operation of air quality and climate programs, such as:

- Consult and coordinate with domestic and international stakeholders on the design and development of the tools;
- Design and develop information technology tools, including database structures and stored procedures, graphical user interfaces (e.g., web pages or desktop applications), web services, APIs, data exchange standards and protocols, and data mining tools;
- Provide suggestions to EPA on appropriate technologies to use for the design, development, and deployment of information technology tools;
- Develop user documentation for the installation and operation of information technology tools;
- Identify and report on good practices to improve the quality of data for air quality and climate change programs.

• Develop and conduct training programs for stakeholders on the installation, set up, and operation of the tools.

The work to be performed supports U.S. EPA capacity building efforts to improve air quality and address climate change. All products developed will be made available to domestic and foreign governments and, when appropriate, other governmental and non-governmental organizations.

#### III. STATEMENT OF WORK TASKS

#### Task 1: Project Management

The contractor shall provide project management under this task, and shall submit a Monthly Status Report to U.S. EPA's Task Order Project Officer. Officer (TOPO). During the Period of Performance, the contractor shall immediately inform the TOPO by telephone and/or email of any problems that may impede performance along with any corrective actions needed by the U.S. EPA or the contractor to solve the problem.

The Monthly Status Report shall include, at a minimum, the following information for each of the above tasks and a summary of all tasks:

Activities of the past month. A summary of the actions taken and progress made on all outstanding tasks for the past month.

Activities of the next month. A review of the work planned to be done to meet task requirements.

**Problems/Issues**. A discussion of problems or difficulties either anticipated or encountered.

Hours. As applicable, total hours expended during the month, and cumulative total to date. Hours expended must be identified by individual and labor category.

Funds. As applicable, total funds expended during the month, cumulative total to date, outstanding commitments, and percentage of approved funds spent to date.

#### Deliverables and Schedule under Task 1:

| 1.1 | Monthly Status Report | 10 <sup>th</sup> business day each month |
|-----|-----------------------|------------------------------------------|
|     |                       | · ,,,,,,,                                |

# Task 2: Emissions and Allowance Tracking System Software Design and Development

The Emissions and Allowance Tracking System (EATS) is an integrated registry for the operation of one or more emission trading programs. Under this task, the Contractor shall modify the existing EATS software and develop new modules in accordance with requirements and specifications provided by the TOPO. The Contractor shall review requirements and specifications and provide a recommended approach for software development based on guidance provided in written, technical direction from the TOPO. Upon TOPO approval of the approach, the Contractor shall develop software and documentation to meet the requirements and specifications. As these specifications are subject to constant evolution, the Contractor shall work closely with the TOPO to consider the most recent software and technical upgrades necessary to continue to keep EATS up to date with other software platforms.

The Contractor shall begin to integrate improvements and new specification into the underlying EATS structure, functions and user interface based on input received from stakeholders involved in custom build-outs of EATS, in consultation with the TOPO, EPA Subject Matter and Technical Experts (SMTE), and other stakeholders. The Contractor shall:

- Database Structure Charts: draft and modify database designs as necessary using Government Furnished Information (GFI), written technical direction from the TOPO, and information from consultations with EPA STMEs and other stakeholders.
- User Interface (UI) Designs: modify using GFI, written technical direction from the TOPO, and information from consultations with EPA STMEs and other stakeholders to improve usability and develop new UIs as necessary to enhance functionality,
- Reports and Custom Query Module: design a query tool using GFI, written
  technical direction from the TOPO, and information from consultations with EPA
  STMEs and other stakeholders to allow users to develop custom data requests and
  save those requests to a specified file format (e.g., CSV, HTML, XML),
- Functionality Testing: test the system using GFI, technical direction from the TOPO, and information from consultations with EPA STMEs and other stakeholders to ensure that it meets the basic functionality requirements and can support the processing requirements as identified in the design documentation,
- Security Testing: conduct security tests using GFI, technical direction from the TOPO, and information from consultations with EPA STMEs and other stakeholders to ensure the integrity of the data and software,
- Documentation: develop documentation using GFI, technical direction from the TOPO, and information from consultations with EPA STMEs and other stakeholders to assist stakeholders with the installation, set up, and operation of the system,
- Training Program: design a program using GFI, technical direction from the TOPO, and information from consultations with EPA STMEs and other

stakeholders to assist stakeholders with the installation, set up, and operation of the system, and

• Software Updates: provide the TOPO with quarterly software updates following significant changes to the database or UIs, by either (a) installing the updates on a computer specified by the TOPO, or (b) sending CDs or installation files to the TOPO.

#### Deliverables and Schedule under Task 2:

| 2.1 | Database Structure Charts               | 5 business days after technical direction from TOPO                     |
|-----|-----------------------------------------|-------------------------------------------------------------------------|
| 2.2 | User Interface Designs                  | 10 business days after technical direction from TOPO                    |
| 2.3 | Reports and Custom Query Module Designs | 3 months after Task Order initiation                                    |
| 2.4 | Functionality Testing                   | 4 months after Task Order initiation                                    |
| 2.5 | Security Testing                        | 4 months after Task Order initiation                                    |
| 2.6 | Documentation                           | 6 months after Task Order initiation                                    |
| 2.7 | Training Program                        | 9 months after Task Order initiation                                    |
| 2.8 | Software Updates                        | 3 months, 6 months, 9 months, and 12 months after Task Order initiation |

Task 3: Online Calculation, Reporting, and Verification Tool

The Online Calculation, Reporting, and Verification Tool (CRAVe) is a software tool for companies or other organizations to calculate and report emissions of any pollutant to a centralized program. CRAVe can also be used by the central authority to verify, track, and manage emission data from sources participating in the program. Under this task, the contractor shall modify the existing CRAVe software and develop an enhanced emission reporting module that allows reporters to calculate multiple emissions for each fuel consumed, product produced, and product purchased. The contractor shall also modify the existing CRAVe software and develop and enhanced verification module in accordance with requirements and specifications provided by the TOPO. The contractor shall review requirements and specifications and provide a recommended approach for software development based on guidance provided by the TOPO in the form of technical direction. Upon approval of the approach by the TOPO, the contractor shall develop software to meet the requirements and specifications. The Contractor shall:

- Database Structure Charts: using GFI, technical direction from the TOPO, and information from consultations with EPA Subject Matter and Technical Experts (SMTE) and other stakeholders, draft and modify database designs as necessary;
- User Interface (UT) Designs: using GFI, technical direction from the TOPO, and information from consultations with EPA SMTEs and other stakeholders, modify

the existing UIs to improve usability and develop new UIs as necessary to enhance functionality;

- Verification Module: using GFI, technical direction from the TOPO, and information from consultations with EPA SMTEs and other stakeholders, design and develop a verification tool to allow registered users to verify emission reports from companies or other organizations;
- Communication Functionality: using GFI, technical direction from the TOPO, and information from consultations with EPA SMTEs and other stakeholders, design and develop the functionality for CRAVe to communicate with other data systems (see task 4);
- Functionality Testing: using GFI, technical direction from the TOPO, and
  information from consultations with EPA SMTEs and other stakeholders, test the
  system to ensure that it meets the basic functionality requirements and can support
  the processing requirements as identified in the design documentation;
- Security Testing: using GFI, technical direction from the TOPO, and information from consultations with EPA SMTEs and other stakeholders, conduct security tests to ensure the integrity of the data and software;
- Documentation: using GFI, technical direction from the TOPO, and information from consultations with EPA SMTEs and other stakeholders, develop documentation to assist stakeholders with the installation, set up, and operation of the system;
- Training Program: using GFI, technical direction from the TOPO, and information from consultations with EPA SMTEs and other stakeholders, design a program to train users on the installation, set up, and operation of the system; and
- Software Updates: following significant changes to the database or UIs, provide the TOPO and EPA SMTE with quarterly software updates, either by (a) installing the updates on a computer(s) specified by the TOPO, or (b) sending CDs or installation files to the TOPO.

#### Deliverables and Schedule under Task 3:

| 3.1 | Database Structure Charts   | 5 business days after technical direction from TOPO                                   |
|-----|-----------------------------|---------------------------------------------------------------------------------------|
| 3.2 | User Interface Designs      | 10 business days after technical direction from TOPO                                  |
| 3.3 | Verification Module         | 4 months after Task Order initiation                                                  |
| 3.4 | Communication Functionality | 9 months after GFI (common data exchange standards) and technical direction from TOPO |
| 3.5 | Functionality Testing       | 10 months after Task Order initiation                                                 |
| 3.6 | Security Testing            | 10 months after Task Order initiation                                                 |
| 3.7 | Documentation               | 11 months after Task Order initiation                                                 |

| 3.8 | Training Program | 11 months after Task Order initiation |
|-----|------------------|---------------------------------------|
| 3.9 | Software Updates | 3 months, 6 months, 9 months, and 12  |
|     | ·                | months after Task Order initiation    |

#### Task 4: Data Exchange Standards for Emission Reporting

The Contractor shall participate in cross-organizational efforts to develop a common data exchange standard for emission calculation tools. Such participation would include providing the TOPO with technical input during the development of common data exchange standards. The Contractor shall:

- Technical Input: provide information and suggestions to the TOPO and crossorganizational working group (through the TOPO) on the design of data exchange standards, including what is necessary for CRAVe to be compatible with the standards.
- Support of Cross-Organization Efforts: provide technical support to data exchange standard working group, upon written technical direction from the TOPO. Such technical support could include compiling stakeholder comments on the data exchange standards, and providing technical input on appropriate responses and action items stemming from stakeholder input.

## Deliverables and Schedule under Task 4:

| 4.1      | Technical Input                       | As necessary                     |
|----------|---------------------------------------|----------------------------------|
| 4.2      | Support of Cross-Organization Efforts | 10 business days after technical |
| <u> </u> | ·                                     | direction from the TOPO          |

#### IV, DELIVERABLES

Deliverable due dates are specified by task above. Distribution of Deliverables should be handled by sending one copy in electronic format to the EPA Contracting Officer and the EPA Task Order Project Officer through electronic mail.

Upon the TOPO's acceptance of the last final deliverable for a task, the contractor shall deliver one copy of final source code, executable code, documentation, test results, and training materials for that task to the TOPO and U.S. EPA Contracting Officer on one or more CD(s).

| AN                  | ENDMENT OF SOLICE                                   | TATION/MODIFICATK                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ON OF CONTRA                           | CT                       | 1. CONTR        | ACT ID CODE                        | PAGE OF PAGE      | )es<br>                     |
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| Nashing             | gton, DC 20460                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                          |                 |                                    |                   |                             |
| NAME A              | ND ADDRESS OF CONTRACTOR (                          | (No., street, county, State and ZiP Code)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                        | . <u> </u>               | <i>(√)</i>      | 9A. AMENDMENT                      | OF SOLICITATIO    | N NO.                       |
| ERRIN               | QUARLES ASSOCIATI                                   | ES,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | _                                      | •                        |                 |                                    |                   |                             |
| NC.                 |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                          | ,               | SB. DATED (SEE ITEM 12             | )                 |                             |
| 675 PE              | TER JEFFERSON PKW                                   | Y,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | · .                                    |                          |                 |                                    |                   |                             |
| UITE 2              | <b>00</b>                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                      |                          | <u> </u>        |                                    |                   |                             |
| <b></b>             |                                                     | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                        |                          | 7               | 19AL MODIFICATION O                | F CONTRACT/O      | RDER                        |
| harlott             | esville, VA 22911                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                          | 1               | NO.                                | O# 9              |                             |
|                     |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        | *                        |                 | EP-W-07-071 T                      |                   | ·                           |
|                     |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                      |                          | 1               | 108. DATED (SEE NEW )<br>          | 149<br>-          |                             |
| ODE FAC             | LITY CODE                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ······································ | <u> </u>                 |                 | gin <b>a</b> ijvi                  |                   |                             |
|                     |                                                     | 11. THIS ITEM ONLY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | APPLIES TO AME                         | NDMENTS                  | OF SOLIC        | ITATIONS                           |                   |                             |
| [] The at           | ove numbered solicitation is ame                    | ended as set forth in Item 14. Th                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | e hour and date specif                 | fied for receip          | t of Offers     | [[is extended, [] is t             | ıqt extended.     | • .                         |
| lers must           | acknowledge receipt of this arres                   | ndment prior to the hour and dat                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | te specified in the solid              | citation or as           | amerated, b     | v one of the following at          | ethods:           |                             |
|                     | leting Items 8 and 15, and returnin                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                          |                 | indment on each copy o             |                   |                             |
|                     | or (c) By separate letter or telegra                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                          |                 |                                    |                   | )                           |
|                     | E RECEIVED AT THE PLACE DESI                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                          |                 |                                    |                   | •                           |
|                     | ON OF YOUR OFFER, If by virtue                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                          | _               |                                    |                   |                             |
| ger, provid         | tod each telegram or letter makes                   | reference to the solicitation an                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | d this amendment, and                  | i is received p          | rior to the d   | beutud vont aug gate ei            | ecities.          |                             |
| 2 ACCOU             | NTING AND APPROPRIATION DAT                         | A AF augreen                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                        |                          |                 |                                    | <u>.</u>          | <u> </u>                    |
|                     | section, Accounting/A                               | · · · · · · · · · · · · · · · · · · ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | the attachment                         | on Páge                  | . 2             |                                    |                   |                             |
|                     |                                                     | 13. THIS ITEM APPLIES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                        |                          | <del></del>     | CTC/ADDEDC                         |                   | <u> </u>                    |
|                     |                                                     | IT MODIFIES THE CO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                        | 121                      | E INDIA INTOINI |                                    |                   | •                           |
| <u>-</u>            | A THIS CHANGE ORDER IS ISS                          | WED PURSUANT TO: (Specify aut                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                        |                          | <del></del>     |                                    | ··· <u>·····</u>  | <u> </u>                    |
| 17 /                | TRACT ORDER NO. IN ITEM                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ***                                    |                          |                 |                                    |                   |                             |
|                     | D. THE ABOUT MUMPEDED OO                            | NITO A DITURNISTO DE LA SOCIETA T                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | O SEE EOT THE ARM                      | <u>.</u>                 | AUANACÉ.        |                                    |                   |                             |
|                     | 3                                                   | NTRACT/ORDER IS MODIFIED T<br>TH IN ITEM 14, PURSUANT TO T                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                        |                          |                 | encu eż śrewiase w beliud cu:      | G8,               |                             |
| · <u></u>           | c. THIS SUPPLEMENTAL AGRE                           | EMENT IS ENTERED INTO PUR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | SUANT TO AUTHORIT                      | Y OF:                    | <u> </u>        |                                    | <u> </u>          |                             |
| <del></del>         | D. OTHER (Specify type of modificati                | on and sutherity                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ·                                      |                          | <u> </u>        |                                    | <u></u>           |                             |
| X                   |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                          |                 |                                    | ·                 |                             |
| <del></del>         |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        | <u> </u>                 |                 |                                    |                   | ·                           |
| <del>`</del>        | ANT: Contractor [X] is not,                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u> </u>                               |                          | s to the issu   |                                    | <del>//</del>     |                             |
|                     | PTION OF AMENDMENT/MODIFIC                          | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                        |                          |                 |                                    |                   |                             |
|                     | pose of this modificati                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | is in the amoun                        | it of \$3,00             | 00 to           | this Task Order.                   | All other         | erms and                    |
| onditio             | ns remain unchanged.                                | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | £                                      |                          |                 |                                    |                   |                             |
|                     |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                          |                 |                                    | •                 |                             |
|                     | ,                                                   | . "                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                        |                          |                 | •                                  |                   | ·                           |
|                     |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        |                          |                 |                                    |                   |                             |
| į                   |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                      | ,                        |                 |                                    |                   | · v                         |
|                     |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ,                                      |                          | i               | *                                  |                   |                             |
| ۔<br>۔ سسامید پرجری | மாக <b>்சித்து கொ</b> கர்க் கம் கொள்ள கட்டிக்கார்.  | distingue of the state of the s |                                        |                          |                 | ء ف فد مصد مطاعمترين <u>سوالسس</u> | , <b>4.13</b> F   |                             |
| nd effect           | rovided herein, all terms and cond                  | 306AP OF THE OOSTRUCKUI LEISLEIN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ted in seni swift low, )               | as neretorors            | caangeo, re     | manis uncreaged and r              | N TEHR FORCE      |                             |
| 5a. Nan             | IE AND TITLE OF SIGNER (Type or)                    | oring.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                        | 16A, NA!                 | WE AND TIT      | E OF CONTRACTING O                 | FFICER (Type or p | kņuti                       |
|                     |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        | STACE                    | Y L. WO         | ĹĔĴĸŌ                              |                   |                             |
| 5B, CON             | ITRACTOR/OFFEROR                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ISC DATE SIGNED                        |                          |                 | S OF AMERICA                       |                   | 16C. DATE SIGNE             |
|                     |                                                     | ľ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                        | VI.                      |                 | 1,50.1.5                           |                   |                             |
| <del></del>         | (M)                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        | 1 (2)                    | <u> </u>        | way M                              |                   | 1112770                     |
|                     | (Signature of person authorized to sign) 1-152-8070 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <u> </u>                               | G-1Q5                    | (Signature V    | Contracting Officer                | ¢†asin ××××       | CODA DA (BENIA) PI          |
|                     | tytokautu<br>EDITION UNUSABLE                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | -81                                    | 6- 143                   |                 |                                    | Prescribed b      | FORM 36 (REV 10-83<br>y GSA |
| : <del>- पक</del>   |                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                        | ٠                        |                 |                                    | FAR (48 CFF       |                             |

Contract: EP-W-07-071, Task Order: 0003, Mod: 0001

Lead PR Number: PR-HQ-08-10405

#### Summary Information

Title:

Developing Tools to Improve Data Management for

Atmospheric Programs

Period of Performance:

From: 11/27/07 To:

06/30/08

Award Date:

11/27/07

Total Funding:

\$88,465.00

## Accounting/Appropriation Data

The following item(s) have been added:

| POP  | DCM    | BFYS       | Appr.# |       | Program<br>Element | _ =      | Cost<br>Org | Obj<br>Clss |                                     | Amount | C \ |
|------|--------|------------|--------|-------|--------------------|----------|-------------|-------------|-------------------------------------|--------|-----|
|      | M      | ** *** *** |        | m = # |                    | ·        |             |             | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ |        | Au. |
| Base | FC7318 | 07         | B      | 58F7  | 105A46C            | 00000000 |             | 2505        | \$3,                                | 000.00 | P   |

# **Funding Breakout**

| Acct.Info       | Funding Category | Amount      |
|-----------------|------------------|-------------|
| FY2007 - FC7316 | [M] Cost Ceiling | \$11,795.90 |
|                 | Total:           | \$11,795.90 |
| FY2007 - FC7318 | [M] Cost Ceiling | \$76,669.10 |
|                 | Total:           | \$76,669.10 |

- Modified

[A] - Added

# **TO Totals**

The following item(s) have been modified:

| Category                                      | POP      | From        | By         | To          |
|-----------------------------------------------|----------|-------------|------------|-------------|
| ~ <u>~===================================</u> |          | ~ ~ ~ ~     |            |             |
| Cost Ceiling                                  | Base Pd. | \$85,465.00 | \$3,000.00 | \$88,465.00 |

#### TO Classification

The following changes have occurred:

The Task Order Cailing has changed from \$85,465.00 to \$88,465.00.

| AMENDMENT OF SOLICIT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | TATION/MODIFICATI                                                                                                    | ON OF CONTRA                          | CT           | 1. CONTR                               | ACT ID CODE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | PAGE OF PAGES  1 2                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|---------------------------------------|--------------|----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| 2. AMENDMENT/MODIFICATION NO. 0002                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 3. EFFECTIVE DATE<br>See Block 160                                                                                   |                                       | 4. REQUI     | S/TION/PURC                            | HASE REQ. NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 5. PROJECT NO. (if appoints abid) |
| 6. ISSUED BY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | CODE                                                                                                                 |                                       | 7. ADMIN     | ISTERED BY                             | it other than Kern 6) COD                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | £                                 |
| U.S. Environmental Protection                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                      |                                       | ]            | ٠                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
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| the second by the second of th | hance with the standing of the court with the sales                                                                  | ,                                     |              | (4)                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
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| Thadalla VA 22044                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                      |                                       | 5            | 1                                      | 10A. MODIFICATION O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | F CONTRACT/ORDER                  |
| Charlottesviile, VA 22911                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                      |                                       |              | 1                                      | EP-W-07-071 TO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | O# 3                              |
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| YORE EACH ITY CYINE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                      |                                       | <del></del>  |                                        | 11/27/07                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                   |
| CODE FACILITY CODE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 11. THIS ITEM ONL                                                                                                    | APPLIES TO AME                        | NDMENTS      | OF SOLIC                               | I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                   |
| [] The above membered solicitation is ame                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                      |                                       |              |                                        | <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | oot extended.                     |
| offers must acknowledge receipt of this amer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                      |                                       |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                 |
| ) By completing Items 8 and 15, and returning                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                      |                                       |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
| ubmitted; or (c) By separate letter or telegral                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | m which includes a reference to                                                                                      | the solicitation and an               | endment n    | umbers, FAIL                           | URE OF YOUR ACKNOW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                   |
| IENT TO BE RECEIVED AT THE PLACE DESI<br>I REJECTION OF YOUR OFFER. If by virtue:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                      |                                       |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Firmers Off                       |
| otter, provided each telegram or letter makes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                      |                                       |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
| 2. ACCOUNTING AND APPROPRIATION DAT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | A (Managhan A)                                                                                                       |                                       | <u></u>      |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
| I/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Se fet tadminate)                                                                                                    |                                       |              |                                        | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | •                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 13. THIS ITEM APPLIES                                                                                                | ONLY TO MODIFIC                       | ATIONS C     | F CONTRA                               | CTS/ORDERS.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | IT MODIFIES THE CO                                                                                                   |                                       |              | · ·                                    | A STATE OF THE STA |                                   |
| VF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | SUED PURSUANT TO: (Specify as                                                                                        | thorty) THE CHANGES                   | ET FORTH     | IN ITEM 14 A                           | RE MADE IN THE CON-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                   |
| TRACT ORDER NO. IN ITEM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 10A                                                                                                                  |                                       |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
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| Appropriedless date, etc.) SET FOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | TH IN ITEM 14, PURSUANT TO                                                                                           | THE AUTHORITY OF FA                   | \R 43,103(b) | <b>]</b> .                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
| c. THIS SUPPLEMENTAL AGRE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | EMENT IS ENTERED INTO PUR                                                                                            | SUANT TO AUTHORIT                     | Y OF:        |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
| D. OTHER (Specify type of modification                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                      |                                       | <u></u>      | ······································ |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
| 2. Williams (Obesse About Store                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | me data shorts at all                                                                                                | ·                                     |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
| E. IMPORTANT: Confractor (X [ is not,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | المارية والمراجعة المراجعة | · ulanimana and univers               | 400          | luu ta tha lac.                        | ilan Affina                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                   |
| 4. DESCRIPTION OF AMENDMENT/MODIFIC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                      |                                       |              | ies to the less                        | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                   |
| 1. The purpose of this modific                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                      |                                       |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | of effort for the work            |
| specified under this task order                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                      |                                       |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                 |
| of effort of 957 hours, in accor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                      |                                       |              | · .                                    | · = · = · · = · · · · · · · · · · · · ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                   |
| 2. This modification also author                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                      |                                       |              | •                                      | <u></u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                   |
| performance of work under thi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                      | · · · · · · · · · · · · · · · · · · · |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
| Quality Assurance Analyst I @                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                      |                                       |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Similarion Paris ( Carlos)        |
| 3. The period of performance of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                      |                                       |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | net to the agvernment A           |
| other terms and conditions re                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                      | xtesseed tilloug                      | ss rajaul    | y 2000 A                               | no guoiscriar cy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Dar to sie Anseimment v           |
| onial talling and adilatification                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | nem assessingen.                                                                                                     | . •                                   |              |                                        | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                      |                                       |              |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | mar and a second se       | د جد السرافواليان                     |              | -                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | . m. či K                         |
| Except as provided herein, all terms and core                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Illions of the document referen                                                                                      | iced in liem 9A or 10A, a             | as heretofor | e changed, re                          | main's unchanged and it                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | n full force                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                      |                                       | 18A. N       | WE AND TIT                             | E OF CONTRACTING O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | FFICER (Type or print)            |
| and offect.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Secret.                                                                                                              |                                       | 1            |                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |
| and offect.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | tandt.                                                                                                               |                                       | <b>.</b>     | PALSYS                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | •                                 |
| and effect.  15A. NAME AND TITLE OF SIGNER (Type or )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                      | 15C DATE SIGNED                       |              | AYE SAS                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 1EC DATE SIGNE                    |
| and offect.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                      | 15C DATE SIGNED                       |              | ······························         | S OF AMERICA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 16G. DATE SIGNE                   |
| and offect.  15A. NAME AND TITLE OF SIGNER (Type or )  15B. CONTRACTOR/OFFEROR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                      | 15C DATESMED                          |              | WITED STATE                            | S OF AMERICA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 18C. DATE SIGNE                   |
| and offect.  15A. HAME AND TITLE OF SIGNER (Type or )                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                      |                                       |              | WITED STATE                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                   |

F

Contract: EP-W-07-071, Task Order: 0003, Mod: 0002

## **Summary Information**

Title: Developing Tools to Improve Data Management for

Atmospheric Programs

Period of Performance: From: 11/27/07

To: 07/15/08

Award Date: 11/27/07 Total Funding: \$88,465.00

## **Funding Breakout**

| Acct Info       | Funding Category | Amount      |
|-----------------|------------------|-------------|
| FY2007 - FC7316 | Cost Ceiling     | \$11,795.90 |
|                 | Total:           | \$11,795.90 |
| FY2007 - FC7318 | Cost Ceiling     | \$76,669.10 |
|                 | Total:           | \$76,669.10 |

[M] - Modified

[A] - Added

#### TO Classification

The following changes have occurred:

The Anticipated Expiration Date has changed from 06/30/08 to 07/15/08.

| A                       | MENDMENT OF SOLICI                                                         | TATION/MODIFICA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | TION OF CONTR              | ACT           | 1. CONTR                   | ACT ID CODE                    | PAGE OF PAGES                            |
|-------------------------|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|---------------|----------------------------|--------------------------------|------------------------------------------|
|                         | DMENT/MODIFICATION NO.                                                     | 3. EFFECTIVE DA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            | 4. REC        | UISITION/PURC              | HASE REQ. NO.                  | 5. PROJECT NO. (# applicable)            |
| 0003                    | Pr. Prog                                                                   | See Block 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <u> </u>                   | 7 455         |                            |                                |                                          |
| 6. ISSUE                | •                                                                          | CODE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                            | 7. ADW        | iinistered by (            | ff other than item 6) COD!     |                                          |
|                         | nvironmental Protection                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
|                         | istrative Contract Servic                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
|                         | ennsylvania Avenue, N.\                                                    | N.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                            |               |                            |                                |                                          |
| Washii                  | ngton, DC 20460                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
| R MARKE                 | AND ADDRESS OF CONTRACTOR                                                  | Was atmost asserts Pitris and 710 /                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                            | <b>.</b>      | 7.51                       | 9A. AMENDMENT C                | F SOLICITATION NO.                       |
| 01 1476#M               | MAD UPPURED AL AAM (MACALAIX)                                              | are a seem and the seems are t | ovej                       |               | ( <b>√</b> )               | OV. MINISTERNION C             | TO MONTH TO                              |
| DEDDI                   | N QUARLES ASSOCIATI                                                        | ce                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                            |               |                            |                                | ıt                                       |
|                         | N QUARLES ASSOCIATI                                                        | E <b>3</b> ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                            |               |                            | 9B. DATED (SEE (TEM 17)        |                                          |
| INC.                    | FTTO IFFERNON NAM                                                          | v                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |               |                            | ,                              |                                          |
|                         | ETER JEFFERSON PKW                                                         | Υ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                            |               | Į.                         |                                |                                          |
| SUITE                   | 300                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
| Charle                  | ttesville, VA 22911                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               | '                          | 19A. MODIFICATION OF NO.       | CONTRACT/ORDER                           |
| CHAILIO                 | uesviile, va 22311                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            | EP-W-07-071 TO                 | <b>)#</b> 3                              |
| ٠                       |                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            | 10B. DATED (SEE TEM 1:         |                                          |
|                         |                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            | 11/27/07                       | · r                                      |
| CODE FA                 | ACILITY CODE                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
|                         |                                                                            | 11. THIS ITEM ON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | LY APPLIES TO AME          | NDMEN         | TS OF SOLICI               | TATIONS                        | • ''                                     |
| [] The                  | above numbered solicitation is ame                                         | nded as set forth in Item 14.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | The hour and date speci    | ified for rea | ceipt of Offers            | [] is extended, [] is n        | of extended.                             |
| Öffers ma               | st acknowledge receipt of this amen                                        | dment prior to the hour and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | date specified in the soli | citation or   | as accended, by            | one of the following me        | thods:                                   |
| (a) By con              | mpleting Kems 8 and 15, and returnin                                       | gcopies of the am                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | endment; (b) By acknowl    | ledging red   | mipt of this ame           | ndment on each copy of         | the offer                                |
|                         | i; or (c) By separate letter or telegrar<br>BE RECEIVED AT THE PLACE DESI: |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                | LEDG-                                    |
|                         | TION OF YOUR OFFER. If by virtue                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                | ram or                                   |
| letter, pro             | vided each telegram or letter makes                                        | reference to the solicitation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | and this amendment, an     | d is receive  | ed prior to the op         | ening hour and date sp         | scified.                                 |
| 12 እርሃነብ                | UNTING AND APPROPRIATION DAT                                               | A reasonable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                            |               |                            |                                | · · · · · · · · · · · · · · · · · · ·    |
|                         | e section, Accounting/A                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | in the attachmen           | t on Pa       | ne 2                       |                                |                                          |
| Web Min                 | c oconom, Accounting                                                       | 13. THIS ITEM APPLIE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                            |               | •                          | TO/AONEDO                      |                                          |
|                         |                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | CONTRACT/ORDER             |               |                            |                                |                                          |
| {√}                     | A. THIS CHANGE ORDER IS ISS                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
| 1- 1                    | TRACT ORDER NO. IN ITEM                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | **,                        | -             |                            |                                |                                          |
|                         | D TUE ABOUT HUMONOS ON                                                     | JEDA ATIODOED IS MODIFIC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | n vå acci car tile sas     |               | 0. spr. 344 t t 4 t 34 pr. |                                |                                          |
|                         | B. THE ABOVE NUMBERED COM<br>appropriation date, etc.) SET FOR:            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               | _                          | uch as changes in paying offic | <b>∉</b> ,                               |
|                         |                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                | -                                        |
|                         | c. THIS SUPPLEMENTAL AGRE                                                  | EMENT IS ENTERED INTO P                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | URSUANT TO AUTHORIT        | Y ÖF:         |                            |                                |                                          |
|                         | P. A.T. (500)                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
| Х                       | D. OTHER (Specify type of modification                                     | er and authority)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                            |               |                            |                                |                                          |
|                         | <u> </u>                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
| E 44000                 | TANT. Comments - 14 15                                                     | ## for up mr. tup 18 pm mfmm 41                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | h.fF , ,                   |               |                            |                                |                                          |
|                         | RTANT: Contractor [X] is not,                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | his document and return    |               | ples to the issui          |                                |                                          |
|                         | RIPTION OF AMENDMENT/MODIFICA                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
|                         | rpose of this modification                                                 | on is to de-obligate                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | remaining rundi            | ng in tr      | ie amount                  | or \$318.64, and t             | o close out this task                    |
| order.                  |                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
|                         |                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
|                         | •                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
|                         |                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
|                         |                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
|                         |                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
| Connut un               | and the same all towards and an art                                        | iliana of the demonstrative Issu                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                            |               |                            |                                | S. B. Sauce                              |
| except as<br>and effect | provided herein, all terms and cond                                        | Mous of the Rocalhett 18191                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | encec in Kem Sa of 19a, :  | as nereton    | же спандеа, ren            | nains unchanged and in         | ERR LOICE                                |
|                         | ME AND TITLE OF SIGNER (Type or p                                          | rino                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                            | 16A. )        | IAME AND TITLE             | OF CONTRACTING OF              | FICER (Type or print)                    |
|                         |                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                |                                          |
|                         | ,                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               | FAYE SAS                   |                                |                                          |
| 15B. CO                 | NTRACTOR/OFFEROR                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 15C DATE SIGNED            | 16B. l        | NITED STATES               | OF AMERICA                     | 16C. DATE SIGNED                         |
|                         |                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            | <b>\$</b>     | Fare &                     | -                              | 142 7                                    |
|                         | (Signature of person authorized to sign)                                   | ······································                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                            |               | (Signature of C            | ontracting Officer)            | 14 322 10                                |
| =                       | 01-152-8070                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 3/                         | )-105         |                            |                                | STANDARD FORM 30 (REV 10-83)             |
| PREVIOUS                | SEDITION UNUSABLE                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |               |                            |                                | Prescribed by GSA<br>FAR (48 CFR) 52.243 |

Contract: EP-W-07-071, Task Order: 0003, Mod: 0003

## **Summary Information**

Title: Developing Tools to Improve Data Management for

Atmospheric Programs

Period of Performance: From: 11/27/07

To: 07/15/08

Award Date: 11/27/07
Total Funding: \$88,146.36

## Accounting/Appropriation Data

The following item(s) have been added:

|      |        |      |      |      |         |          |      | •    |            | $\mathbf{\hat{b}}$ |
|------|--------|------|------|------|---------|----------|------|------|------------|--------------------|
| •    |        |      |      |      |         | Site/    | Cost | Obj  |            | 1                  |
| POP  | DCN    | BFYS | Fund | Org  | PRC     | Project  | Org  | Clss | Amount     | $\mathbf{C}$       |
|      |        |      |      |      |         |          |      |      |            |                    |
| Base | FC7318 | Ö7   | В    | 58F7 | 105A46C | 00000000 |      | 2505 | (\$318.64) |                    |

#### **Funding Breakout**

| Acct.Info       | Funding Category | Amount      |
|-----------------|------------------|-------------|
| FY2007 - FC7316 | [M] Cost Ceiling | \$11,795.90 |
|                 | Total:           | \$11,795.90 |
| FY2007 - FC7318 | [M] Cost Ceiling | \$76,350.46 |
|                 | Total:           | \$76,350.46 |

[M] - Modified [A] - Added

## **TO Totals**

#### The following item(s) have been modified:

| Category     | POP      | From        | By         | To          |
|--------------|----------|-------------|------------|-------------|
|              |          |             |            |             |
| Cost Ceiling | Base Pđ. | \$88,465.00 | (\$318.64) | \$88,146.36 |

#### **TO Classification**

#### The following changes have occurred:

The Task Order Ceiling has changed from \$88,465.00 to \$88,146.36.

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